

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

26694 7590 06/21/2005

VENABLE LLP
 P.O. BOX 34385
 WASHINGTON, DC 20045-9998

09/20/2005 MBEYENE2 00000182 220261 09922948

01 FC:1501 1400.00 DA
 02 FC:1504 300.00 DA



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/922,948	08/07/2001	Stefan Wigger	33713W003	9507

TITLE OF INVENTION: HARDENING PROTECTION COMPOSITIONS FOR PARTIAL CARBURIZATION OF METALLIC COMPONENTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	09/21/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
WILKINS III, HARRY D	1742	148-210000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Marina V. Schneller
 2 VENABLE LLP
 3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Durferrit GmbH

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Mannheim, Germany

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 22-0261 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Typed or printed name

Marina V. Schneller

Date

Registration No.

26,032

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS: SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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USE IN LIEU OF PTO/SB/17 (11-04)
Reflects USPTO filing fees in effect from 12/___/04

FEE TRANSMITTAL For FY 2005 <i>(Reflects USPTO filing fees in effect from 12/08/04)</i>				Complete if Known																																																																			
<div style="border: 1px solid black; padding: 5px;"><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</div> <div style="border: 1px solid black; padding: 5px;">TOTAL AMOUNT OF PAYMENT (\$) 1,700.00</div>				Application Number		09/922,948																																																																	
				Filing Date		August 7, 2001																																																																	
				First Named Inventor		Stefan WIGGER																																																																	
				Examiner Name		H. Wilkins																																																																	
				Art Unit		1742																																																																	
				Attorney Docket No.		37934-211661																																																																	
METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)																																																																			
<div style="border: 1px solid black; padding: 5px;"><input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Deposit Account <input type="checkbox"/> None Deposit Account Number: <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: center;">22-0261</div> Deposit Account Name: <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: center;">Venable LLP</div> The Director is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments to the above-identified deposit account. <input type="checkbox"/> Other (please identify): _____</div>				2. EXTRA CLAIM FEES																																																																			
				<table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th style="text-align: left;">Fee Description</th><th style="text-align: right;">Fee (\$)</th><th style="text-align: right;">Small Entity Fee (\$)</th></tr></thead><tbody><tr><td>Each claim over 20</td><td style="text-align: right;">50</td><td style="text-align: right;">25</td></tr><tr><td>Each independent claim over 3</td><td style="text-align: right;">200</td><td style="text-align: right;">100</td></tr><tr><td>Multiple dependent claims</td><td style="text-align: right;">360</td><td style="text-align: right;">180</td></tr><tr><td>For Reissues, each claim over 20 and more than in the original patent</td><td style="text-align: right;">50</td><td style="text-align: right;">25</td></tr><tr><td>For Reissues, each independent claim more than in the original patent</td><td style="text-align: right;">200</td><td style="text-align: right;">100</td></tr><tr><td colspan="3">Total Claims</td></tr><tr><td style="text-align: right;">- 20 =</td><td style="text-align: right;">0</td><td style="text-align: right;">x 50 = 0.00</td></tr><tr><td colspan="3">Indep. Claims</td></tr><tr><td style="text-align: right;">- 3 =</td><td style="text-align: right;">0</td><td style="text-align: right;">x 200.00 = 0.00</td></tr><tr><td colspan="3">Multiple Dependent Claims</td></tr><tr><td></td><td style="text-align: right;">Fee (\$)</td><td style="text-align: right;">Fee Paid (\$)</td></tr><tr><td></td><td></td><td style="text-align: right;">180.00</td></tr><tr><td colspan="3" style="text-align: right;">Subtotal (2) \$</td></tr></tbody></table>				Fee Description	Fee (\$)	Small Entity Fee (\$)	Each claim over 20	50	25	Each independent claim over 3	200	100	Multiple dependent claims	360	180	For Reissues, each claim over 20 and more than in the original patent	50	25	For Reissues, each independent claim more than in the original patent	200	100	Total Claims			- 20 =	0	x 50 = 0.00	Indep. Claims			- 3 =	0	x 200.00 = 0.00	Multiple Dependent Claims				Fee (\$)	Fee Paid (\$)			180.00	Subtotal (2) \$																								
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Signature:		Registration No. (Attorney/Agent)	26,032																																																																				
Name (Print/Type) Marina V. Schneller		Telephone	(202) 344-4000																																																																				
		Date	9/16/05																																																																				